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TO: EXAMINER ROBERT W. MORGAN

ART UNIT 3626

FAX: (571) 273-8300

FROM: JOHN PIENKOS

APPLICANT, U.S. PATENT APPL. NO. 09/694,402

FAX: (262) 643-4165

DATE: SEPTEMBER 1, 2011

**RE: SUPPLEMENTAL IDS** 

NOTE: PLEASE NOTE THAT THIS FAX INCLUDES:

- 1) SUPPLEMENTAL IDS TRANSMITTAL
- 2) PTO FORM 1449 LISTING 6 U.S. PATENTS
- 3) CREDIT CARD PAYMENT FORM AUTHORIZING IDS FEE

**5 PAGES INCLUDING COVER SHEET** 

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### SEP 0 1 2011

PATENT

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I hereby certify that this correspondence is being faxed to Exa Trademark Office at (571) 273-8300 on the following date:	2	<u> </u>	<u> </u>		27	Y	

#### IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant:

Pienkos, John T.

Serial No.:

09/694,402

Filing Date:

October 22, 2000

Title:

SYSTEM AND METHOD FOR PROVIDING

REDUCED INSURANCE PREMIUMS

Examiner:

Robert W. Morgan

Art Unit:

3626

### SUPPLEMENTAL INFORMATION DISCLOSURE STATEMENT

Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

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Dear Sir:

The enclosed documents are being submitted in the above-identified Application in compliance with 37 CFR 1.97 & 1.98:

- (1) Pursuant to 37 CFR 1.97(b)
  (within 3 months of filing or prior to mailing of 1<sup>st</sup> Office Action)
- (2) Certification Pursuant to 37 CFR 1.97(c) (before Final Office Action or Allowance)
- (3) Fee Payment Pursuant to 37 CFR 1.97(c) (before Final Office Action or Allowance)
- (4) Petition, Certification & Petition Fee Payment Pursuant to 37 CFR 1.97(d) (before or on issue fee payment)
- (5) A list of documents on Form PTO-1449

This paper is submitted in accordance with:

- (6) 37 CFR 1.97(b) (within 3 months of filing or prior to 1st Office Action)
- (7) 37 CFR 1.97(c) (before Final Office Action or Allowance, whichever is earlier); and

			(8)	The required certification made in item 11 below; or					
				The \$240.00 fee specified in 36 CFR 1.17(p) for ission of this Information Disclosure Statement is rized in item 14 below.					
×	(10)	37 CF	R 1.97(	(d) (before or on issue fee payment); and					
	*		losure S	s a petition for consideration of the subject Information tatement. The petition fee of \$180.00 required by 37 is authorized in item 14 below.					
	×	[b]	The re	equired Certification is stated in item 11 below.					
X	(11)	Certif	Certification						
		(12)	in a co	item of information contained in this Statement was cited ommunication from a foreign patent office in a erpart foreign application not more than three months to the filing of this Statement; or					
	×	(13)	a com foreig this do any in	or of information contained in this Statement was cited in munication from a foreign patent office in a counterpart of application or, to the knowledge of the person signing ocument after making reasonable inquiry, was known to adividual designated in 37 CFR 1.56(c) more than three onths prior to the filing of this Statement.					
×	(14) credit	•		he petition fee of \$180.00 required by 37 CFR 1.17(p) by authorized. Form PTO-2038 is attached.					
				Respectfully submitted,					
Date:	9/1	/20	<u>ill</u>	By: John T. Pienkos (262) 643-4165					

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Approved for use through 07/31/2012. OMB 0651-0031
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1895, no persons are required to respond to a collection of information unless if contains a valid QMB control number. Complete if Known Substitute for form 1449/PTO Application Number 09/694,402 Filing Date 10/22/2000 INFORMATION DISCLOSURE First Named Inventor JOHN THAPPEUS PIENKOS STATEMENT BY APPLICANT Art Unit (Use as many sheets as necessary) Examiner Name MORSAN, ROBERT W. Sheet Attorney Docket Number

U. S. PATENT DOCUMENTS Examine Document Number Name of Parantas or Pages, Columns, Lines, Where Initials ΝD MM-DD-YYYY **Applicant of Cited Document** Relevant Passages or Relevant Number-Kind Code<sup>2</sup> <sup>(F known)</sup> Figures Appear 4359631 11/16/1982 LOCKWOOD ET AL ŲŞ-4567.359 1/28/1986 LOCKWOOP 5,309,355 ŲŞ-5/3/1994 US-5576951 11/19/1996 U\$-6289, 319 \*\* 9/11/2001 US-7,010,508 317-/2006 U\$ US-US. HS. Lis-US 4-32-US. US-UŠ ÜŞ-30 US. ÜS US US-

FOREIGN PATENT DOCUMENTS									
Examiner Cite Initials No.   Foreign Patent Document No.		Foreign Patent Document	Publication Date	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages				
	Country Code <sup>3</sup> "Number <sup>4</sup> "Kind Code <sup>5</sup> (# known)	MM-DD-YYYY		Or Relevant Figures Appear	76				
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Examiner	-	Date	T"
Signature		Considered	

\*EXAMINER; Initial if reference considered, whether or not citation is in conformance with MPEP 805. Draw line through citation if not in conformance and not considered, include copy of this form with next communication to applicant. \*Applicant's unique citation designation number (optionel). \*See Kinds Codes of USPTO Patent Documents at <a href="https://www.uspto.gov">www.uspto.gov</a> or MPEP 901.04. \*Enter Office that lasted the document, by the two-letter code (WIPO Standard ST.3). \*For Japanese patent documents, the indication of the year of the reign of the Emperor must precede the sarial number of the patent document. \*Kind of document by the appropriate symbols as indicated on the document under WIPO Standard ST.16 if possible. \*Applicant is to place a check mark here if English language. Translation is attached.

This collection of information is required by 37 CFR 1.97 and 1.98. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 2 hours to complete. Including gathering, preparing, and submitting the completed application how to the USPTO. Time will vary depending upon the individual case. Any comments on the emount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Sox 1460, Alexandria, VA 22313-1450.

If you need assistance in completing the form, cell 1-800-PTO-9199 (1-800-788-9199) and select option 2.